



Annual Company Membership Dues (Jan - Dec) : \$150

NEW MEMBERSHIP APPLICATION

You are applying for membership with CAAMP as a (circle one): Distributor Company Supplier Company Multi-Line Rep Business Service Member

Company Name: _____

Has this company ever been a previous member of CAAMP (circle one): YES NO NOT SURE

Mailing Address: _____

Physical Address (if different): _____

Office Phone: _____

Website: _____

First Name	Last Name	Role/Title	Phone	Email
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Administrator for Your Company's CAAMP Account:

Only one person per company can be listed as the administrator for the CAAMP account

Additional Staff for Your Company's CAAMP Account:

Additional staff must be employees of company applying for membership

PPAI / ASI / SAGE Numbers: _____

Other Industry Identifier: _____

Industry Reference #1: _____

Industry Reference #2: _____

Industry Reference #3: _____

Additional notes concerning you or your company that you would like reviewed by CAAMP's Executive Director, CAAMP's Membership Chair, and/or CAAMP's Board of Directors when viewing your application:

Completion of application does not guarantee acceptance of membership.

CAAMP (Carolinas Association of Advertising and Marketing Professionals) - PO Box 801 Macon, GA 31202 Toll Free: 877-95-CAAMP

Please email completed application to info@caampers.org. If you do not receive a prompt response, please call CAAMP's office at 877-95-CAAMP.